MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)	SERIAL NO. 10/561 570	FILING DATE 12-20-05
	APPLICANT(S)	

CLAIMS

	AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT			AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1				51						
2				1			52						
3				1			53						
4				1			54						
5				1			55						
6				1			56						
7				1			57						
8				1			58						
9			2				59						
10				1			60						
11				1			61						
12				1			62						
13				1			63						
14				1			64						
15				3			65						
16				3			66						
17				3			67						
18				3			68						
19			1				69						
20				1			70						
21				2			71						
22			1				72						
23			1				73						
24			2				74						
25			1				75						
26			1				76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.			6				TOTAL IND.						
TOTAL DEP.			26				TOTAL DEP.						
TOTAL CLAIMS			32				TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)